

UNITED STATES HOUSE OF REPRESENTATIVES

FORM B

FINANCIAL DISCLOSURE STATEMENT
For New Members, Candidates, and New Employees

LEGISLATIVE RESOURCE CENTER

18 MAR 21 PM 1:27

Name: EDWARD R. ZIEGLER Daytime Telephone: _____

FILER STATUS	New Member of or Candidate for U.S. House of Representatives		State: <u>TX</u> District: <u>07</u>	Check if Amendment
	Candidates – Date of Election: _____			
New Officer or Employee	Staff Filer Type (If Applicable):		Period Covered: January 1, 2017 to <u>FEB 28, 2018</u>	
Employing Office: _____		Shared <input type="checkbox"/> Principal Assistant <input type="checkbox"/>		A \$200 penalty shall be assessed against any individual who files more than 30 days late.

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U.S. HOUSE OF REPRESENTATIVES
(Office Use Only)

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child:	
a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <input checked="" type="checkbox"/>	
b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	
Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? <input checked="" type="checkbox"/>	
F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? <input type="checkbox"/>	
G. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? <input checked="" type="checkbox"/>	

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child? Yes No

EXEMPTION – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: EDWARD R. ZAGLESS

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Use additional sheets if more space is required.

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: EDWARD R. ZEGLER

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Assets and/or Income Sources		Value of Asset	Type of Income	Amount of Income
SP. DC. JT.	ASSET NAME			
	LINCOLN - ANNUITY	None		
	LT OIL PROJECTS US	\$1-\$1,000		
	SP IRA -	\$1,001-\$15,000		
	TESLA	\$15,001-\$50,000		
	APPLE	\$50,001-\$100,000		
	ALPHABET	\$100,001-\$250,000		
ST	BANK OF AMERICA	\$250,001-\$500,000		
SP	BANK OF AMERICA	\$500,001-\$1,000,000		
		\$1,000,001-\$5,000,000		
		\$5,000,001-\$25,000,000		
		\$25,000,001-\$50,000,000		
		Over \$50,000,000		
		Spouse/DC Asset over \$1,000,000*		
		NONE		
		DIVIDENDS		
		RENT		
		INTEREST		
		CAPITAL GAINS		
		EXCEPTED/BLIND TRUST		
		TAX-DEFERRED		
		Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		
		None	Current Year	Preceding Year
		\$1-\$200	I	I
		\$201-\$1,000	II	II
		\$1,001-\$2,500	III	III
		\$2,501-\$5,000	IV	IV
		\$5,001-\$15,000	V	V
		\$15,001-\$50,000	VI	VI
		\$50,001-\$100,000	VII	VII
		\$100,001-\$1,000,000	IX	IX
		\$1,000,001-\$5,000,000	X	X
		Over \$5,000,000	XI	XI
		Spouse/DC Income over \$1,000,000*	XII	XII
		None		
		\$1-\$200		
		\$201-\$1,000		
		\$1,001-\$2,500		
		\$2,501-\$5,000		
		\$5,001-\$15,000		
		\$15,001-\$50,000		
		\$50,001-\$100,000		
		\$100,001-\$1,000,000		
		\$1,000,001-\$5,000,000		
		Over \$5,000,000		
		Spouse/DC Income over \$1,000,000*		

Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME. Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)

Source (include date of receipt for honoraria)	Type	Current Year to Filing	Amount
Examples:			Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
State of Maryland	Salary	\$20,000	\$76,000
Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
ZIEGLER FAMILY LAND AND MINERALS - LLC	SELF		
- EDWARD R. ZIEGLER, LLC	LLC Profits	40,000	150,000
- EDWARD R. ZIEGLER, LLC	Spouse LLC Profits	80,000	300,000

Examples.

Use additional sheets if more space is required.

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SCHEDULE D – LIABILITIES

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a **revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

Column K is for names held solely by your spouse or dependent child.

SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members** and **second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two previous years.

Position	Name of Organization
TREASURER	ZIEGLER FOR CONGRESS COMMITTEE
SOLE MEMBER	EDWARD R. ZIEGLER, LLC
MANAGING MEMBER	OIL OUTSOURCERS LLC
PRESIDENT	ZIEGLER-PERU INC
MANAGING MEMBER	ZIEGLER FAMILY LAND AND MINES LLC
REPRESENTATIVE	ANSI: WELDING AND CUTTING COMMITTEE
	Z-49.1

Use additional sheets if more space is required

SCHEDULE F – AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Name: Edward R. Rieser

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SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and ~~two~~ prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. **Exclude:** Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by law. **Do not repeat information listed on Schedule C.**

**FILER NOTES
(Optional)**

Name: Edward R. Rector

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NOTE NUMBER	NOTES
NONE	

Use additional sheets if more space is required.